

# EXHIBIT 5

9/1/2020

L&amp;I WIN - Enforcement Information

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SEP 03 2020

# Inspection Summary Report

## Inspection Information

DOSH REGION 3

<b>Inspection Number / Program</b>	<b>Triggering Activity</b>	<b>UBI / Bus Loc</b>	<b>Account Number</b>	<b>Special Tracking</b>
317959381 / Safety	209480526	603274879 / 1376281	11084303	
<b>Establishment DBA / Legal Name</b>	<b>Legal Entity</b>	<b>Assignment Type</b>	<b>Site Region</b>	<b>Inspection Scope</b>
GEO CORRECTIONS & DENTENTION / GEO SECURE SERVICES LLC	Limited Liability Corp	Complaint	1055330	Partial
<b>CSHO ID / CSHO Name</b>	<b>CSHO Region</b>	<b>Target List / Rank</b>	<b>On List</b>	<b>OSHA Inspection Number</b>
V9237 / LUIS VILLALVA	1055330	None	N	1475384
<b>Primary NAICS</b>	<b>Primary NAICS Description</b>			
561210	FACILITIES SUPPORT SERVICES			
<b>Site NAICS</b>	<b>Site NAICS Description</b>			
561210	FACILITIES SUPPORT SERVICES			
<b>Site Address</b>		<b>Mailing Address</b>		
GEO CORRECTIONS & DENTENTION 1623 East J Street Nw Detention Ctr #214 Tacoma, WA 98421 Phone: (561) 999-7459 Email: gwenk@geogroup.com		GEO CORRECTIONS & DENTENTION 4955 Technology Way Boca Raton, FL 33431 Phone: (561) 999-7544		

## Violation List

<b>Inspection Number / Program</b>	<b>Triggering Activity</b>	<b>UBI / Bus Loc</b>	<b>Account Number</b>
317959381 / Safety	209480526	603274879 / 1376281	11084303
<b>Establishment DBA / Legal Name</b>	<b>Assignment Type / Site Region</b>	<b>CSHO / CSHO Region</b>	
GEO CORRECTIONS & DENTENTION / GEO SECURE SERVICES LLC	Complaint / 1055330	V9237 LUIS VILLALVA / 1055330	

Violation	Item	Group	Type	Standard	Penalty	Instances	Abatement Days/Date	Date Corrected	Quick Fix
1	1		S	296-809-20002	6,000.00	1		7/10/2020	No
1	2		S	296-809-50002(2)	6,000.00	1		7/10/2020	No
1	3		S	296-809-50012(1)(a)	6,000.00	1		7/10/2020	No
1	4		S	296-809-20004(1)	6,000.00	1		7/10/2020	No
1	5		S	296-809-50014(1)(a)	6,000.00	1		7/10/2020	No
1	6		S	296-809-30002(1)	6,000.00	1		7/10/2020	No
1	7	a	S	296-809-40002(2)	6,000.00	1		7/10/2020	No
1	7	b	S	296-809-40004(1)	0.00	2		7/10/2020	No
1	8		S	296-809-50004(6)	6,000.00	2		7/10/2020	No
<b>Total Penalty: \$48,000.00</b>									

## Inspection Summary

[wisha.apps-inside.lni.wa.gov/win2/Enforcement/EnfCaseFile.aspx?Choice=InspSummary&CaseID=1183631](https://wisha.apps-inside.lni.wa.gov/win2/Enforcement/EnfCaseFile.aspx?Choice=InspSummary&CaseID=1183631)

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L&amp;I WIN - Enforcement Information

Opening Conference with Bruce Scott, Assistant Facility Administrator and Valerie Johnson, HR Manager on 29 Apr 20

Closing Conference with Bruce Scott, Assistant Facility Administrator, Stephen Langford, Facility Administrator, and Wilson Eaton, Attorney on 21 Aug 20

This inspection was initiated as a result of complaint/referral 209480526 addressing the following hazards:

4/23/2020

1. Employees entering a large commercial sized trash compactor without proper protective equipment.
2. Employees were exposed to several inches of liquid waste from the trash.
3. Employees are also required to purchase their own protective equipment.


5/22/20

4. Employees required to work in areas without providing proper fitting personal protective equipment, potential exposure to infectious disease
5. Pat searches are required and the only PPE provided is nitrile gloves when a puncture hazard exists.

Permission was granted to proceed on-site, the opening conference was conducted and all elements of the 1A were explained; a walk-around inspection was performed including photos and interviews. All safety documents were reviewed and most were found to be in order.

As a result of the inspection, the department proposes the following violations.

- 1-1 296-809-20002: Did not identify confined space
- 1-2 296-809-50002(2): No procedures for safe entry into a permit-required confined space
- 1-3 296-809-50012(1)(a): Did not conduct atmospheric testing
- 1-4 296-809-20004(1): Did not inform employees of the permit-required confined space
- 1-5 296-809-50014(1)(a): No rescue plan when entering a permit required confined space
- 1-6 296-809-30002(1): Incomplete confined space program
- 1-7a 296-809-40002(2): Employee training not provided
- 1-7b 296-809-40004(1): Employee proficiency not certified
- 1-8 296-809-50004(6): Entry Permit not filled out.

 1 SEP 20  
CSHO Signature Date

 9/2/2020  
Supervisor Signature Date  
 9/2/20

\_\_\_\_\_  
Reviewer Signature Date



Division of Occupational Safety and Health MS 44600		Washington State Department of Labor & Industries		Inspection Worksheet (1A)	
Inspection # <b>317959381</b>	CSHO ID(s) <b>V9237</b>	Credentials presented? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date of Entry <b>29 APR 20</b>	Time of Entry <b>1102</b>	
Business name <b>Geo Group Northwest Det Center</b>		Consent Statement "My name is _____. I am an inspector for the Washington State Department of Labor and Industries. I am here to conduct a workplace safety and health inspection. Do I have your consent to enter the premises?" (The CSHO will show credentials while getting consent.)			
Site Address <b>1623 EAST J STREET NW DETENTION CTR #244 TACOMA, WA 98421</b>		Employer Rep: (first and last name) <b>Bruce Scott</b>			
Mailing Address <b>4955 TECHNOLOGY WAY BOCA RATON, FL 33411</b>		Denied by: (first and last name)			
Phone # <b>253 946 1611</b>		Alternate Phone # <b>253 8306 4874</b>		Consent/Denial Response <b>"Yes"</b>	
E-mail <b>WILSON@YOUNGLAWMS.COM</b>		UBI <b>603274879</b>		Temp EEs? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
EEs on site <b>350</b>		EEs Covered <b>350</b>		EEs in USA	
ER Reps Name		Title	OC	WA	CC
<b>BRUCE SCOTT</b>		<b>ASST FAC ADMN</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>VALERIE JOHNSON</b>		<b>HR MGR</b>	<input checked="" type="checkbox"/>		
<b>STEPHEN LANGFORD</b>		<b>FAC ADMN</b>			<input checked="" type="checkbox"/>
<b>WILSON EATON</b>		<b>ATTORNEY</b>			<input checked="" type="checkbox"/>
Employees Interviewed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No How many?		Union <b>SEC STAFF IS UNIONIZED SF OFA</b>		Local # <b>883</b>	
Address		Phone <b>253 229 0334</b>			
Opening Conference - Date: <b>29 APR 20</b> Time: <b>1131</b>		Closing Conference - Date: <b>21 AUG 20</b> Time: <b>1031</b>			
<input checked="" type="checkbox"/> Explain WISH Act and DOSH		<input checked="" type="checkbox"/> Discuss hazards observed			
<input checked="" type="checkbox"/> Department can provide standards, posters, logs		<input checked="" type="checkbox"/> Proposed violations and their severity			
<input checked="" type="checkbox"/> Confidentiality of trade secrets <b>SECURITY OF FAC</b>		<input checked="" type="checkbox"/> Penalties may be assessed (explain calculation)			
<input checked="" type="checkbox"/> Request written programs		<input checked="" type="checkbox"/> Subject to further review			
<input checked="" type="checkbox"/> Request copy of OSHA 300/300A		<input checked="" type="checkbox"/> Set reasonable abatement periods			
<input checked="" type="checkbox"/> Explain walk around procedure		<input checked="" type="checkbox"/> Explain extension of abatement			
<input checked="" type="checkbox"/> Interview employees in private		<input checked="" type="checkbox"/> Advise results will be issued			
<input checked="" type="checkbox"/> Discrimination against EEs		<input checked="" type="checkbox"/> Post citation/results			
<input checked="" type="checkbox"/> Walk around pay		<input checked="" type="checkbox"/> Explain proof of correction requirements			
<input checked="" type="checkbox"/> Closing conference will be held		<input checked="" type="checkbox"/> Results of failure to correct			
<input checked="" type="checkbox"/> Do you have minors (17 or under) working for you? [yes] <b>[no]</b>		<input checked="" type="checkbox"/> Availability of consultation and risk management services after abatement period			
<input checked="" type="checkbox"/> Explain violations/penalties may result		<input checked="" type="checkbox"/> Variance (if applicable)			
<input checked="" type="checkbox"/> Inquire of other PPE/safety requirements for inspector (list below) <b>"No"</b>		<input checked="" type="checkbox"/> Appeal rights (15 working days after receipt)			
<input checked="" type="checkbox"/> Stay of abatement					
Shape sheet included <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Stute worksheet included <input type="checkbox"/> Yes <input type="checkbox"/> No		ICP Provided <input type="checkbox"/> Yes <input type="checkbox"/> No	
Closing Conference Review provided <input type="checkbox"/> Yes <input type="checkbox"/> No		Complaint/referral provided <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

Last updated: Aug. 2019

317959381



Washington State Department of  
**Labor & Industries**  
*Division of Occupational Safety and Health*

## Division of Occupational Safety and Health Complaint

<b>Complaint Number:</b>	209480526	OSHA #: 1583960
<b>Region:</b>	1055330	
<b>UBI/Account Number:</b>	603274879 / 11084303	
<b>Employer Legal Name:</b>	GEO SECURE SERVICES LLC	
<b>Employer DBA Name:</b>	GEO CORRECTIONS & DENTENTION	
<b>Site Address:</b>	1623 East J Street Nw Detention Ctr #214 Tacoma, WA 98421	
<b>Mailing Address:</b>	4955 Technology Way Boca Raton, FL 33431	
<b>Management Official:</b>		
<b>Telephone Number</b>		
<b>Type of Business:</b>		

## Notice of Alleged Safety or Health Hazards

Hazard Severity	CSHO Assigned	Due Date	Number of Days
Serious	V9237	5/14/2020	15

### Hazard and Location Description

4/23/2020

Employees entering a large commercial sized trash compactor without proper protective equipment. Compactor was full of food waste, employees were exposed to several inches of liquid waste from the trash. Employees are also required to purchase their own protective equipment.

5/22/20

Employees required to work in areas without providing proper fitting personal protective equipment, specifically, in the Medical area

Detainees are housed with infectious diseases and properly fitting protective equipment is not provided.

Pat searches are required and the only PPE provided is nitrile gloves when a puncture hazard exists.

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